



NAME:

**SHAWN ROSS**

DATE OF BIRTH (M/Y):

**06/1988**

LAST KNOWN ADDRESS:

**W249 S8030 CENTER DR,  
MUKWONAGO WI**

WANTED FOR:

**FAILURE TO PAY CHILD SUPPORT**



**DODGE COUNTY SHERIFFS OFFICE**

**[WWW.DODGECOUNTYSHERIFF.COM](http://WWW.DODGECOUNTYSHERIFF.COM)**

**1-920-386-3726**

